

**COMPLAINT****YOUR PERSONAL INFORMATION**

Complaint ID : OPS-8934

Name :

Sex : MALE

Race : WHITE HISPANIC

Age : 41

Address :

**Your contact information**

Best time to contact : 12:00 AM

Primary Contact Phone

Number :

E-mail Address :

Home Phone Number :

**Your injury information**Were you injured in this  
incident? YES

EMOTIONAL DISTRESS FOR OVER 4 YEARS CAUSED BY ALL THIS

Please describe the injury : POLICE MISCONDUCT AND HARASSMENT

Did you need medical  
attention? NO

Hospital/Medical Center :

Please describe the medical  
treatment :**INFORMATION ABOUT THE INCIDENT**

THIS IS OVER 4 YEARS OF CHICAGO POLICE MISCONDUCT.  
FALSE ARREST DUI(.00 BREATHALYZER WAS THROWN OUT BY  
JUDGE AT TRIAL) , MALICIOUS PROSECUTION, POLICE  
HARASSMENT, RACIAL DISCRIMINATION, STREET HARASSMENT  
CAUSED BY COPS, EMOTIONAL DISTRESS CAUSED BY ALL THIS  
MISCONDUCT, SLANDER, DEFAMATION, CONSPIRACY TO FRAME  
(MANY INNOCENT PEOPLE), DESTROYED NAME WITH FALSE  
HEALTH INFORMATION (BREAKING FEDERAL LAW), SEXUAL  
HARASSMENT AT WORK(AT&T) FOR OVER 1 ? YEARS AND  
WRONGFUL TERMINATION CAUSED BY THE CHICAGO POLICE

Description of the incident :

SLANDER AND MANY OTHER CRIMES. THEY BROKE FEDERAL LAWS IN THEIR SLANDER AND DEFAMATION JOB THEY DID. I CANT FIND A LAWYER IN OVER 2 1/2 YEARS FOR THIS MISCONDUCT CASE AND NOW CANT FIND A EMPLOYMENT LAWYER BECAUSE CHICAGO POLICE ARE INTERFERING WITH ALL MY LAWYERS. I HAVE MANY MANY WITNESSES, VIDEO EVIDENCE OF THE WORK HARASSMENT AND MANY DOCUMENTS TO PROVE ALL THIS MISCONDUCT AND DAMAGES.

#### Location of the incident

Street Number :                          Direction :                          Street Name :                          Apt No. :  
Building Name :                          Floor :                                  Unit :

THEIR ARE MANY INCIDENTS WITH MANY DIFFERENT DATES I HAVE  
**Location Description :** LOTS OF DOCUMENT WITH THE INCIDENTS IN DETAIL WITH DATES  
TIMES AND WITNESSES

#### Incident Date and Time

Date :    Time :

#### Evidence

Video Evidence : YES                          Audio Evidence : YES

#### INFORMATION ABOUT THE POLICE OFFICERS

##### Police officer #1

Last Name : UNKNOWN NAMES                          First Name :                          Star No.. :  
Rank :    Assigned Unit :                          On Duty : NO  
Sex :    Race :

**Officer Description :** UNKNOWN NAMES AT THIS TIME, CAN SUPOENA THEIR NAMES IN COURT

Police Vehicle Beat Number :                          Vehicle Number :                          License Plate :  
Vehicle Description :

**INFORMATION ABOUT VICTIMS AND WITNESSES****Witness #1 personal information**

Last Name : [REDACTED]

First Name : [REDACTED]

Sex : MALE

Race : WHITE HISPANIC

Age : 40

Contact: [REDACTED]

**Witness #1 injury information**Was the witness injured in  
this incident?: NO

Please describe the injury :

Did the witness need medical  
attention?: NO

Hospital/Medical Center :

Please describe the medical  
treatment: